

POSITION

INITIALS

ID NO.

DATE

FEE DETERMINATION

O.I.P.E. CLASSIFIER

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

Request

925

10-18-01

INDEX OF CLAIMS

Rejected N
Allowed I
Canceled A
Restricted O

Non-erected
Interference
Appeal
Objected

| Claim | Date | Claim | Date | Claim | Date |
|---|------|---|------|--------------------------|------|
| Final Original 9/28/01 1/15/03 | | Final Original 9/28/01 1/15/03 | | Final Original 101 | |
| 1 | | 53 | | 102 | |
| 2 | | 54 | | 103 | |
| 3 | | 55 | | 104 | |
| 4 | | 56 | | 105 | |
| 5 | | 57 | | 106 | |
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| 11 | | 63 | | 112 | |
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| 13 | | 65 | | 114 | |
| 14 | | 66 | | 115 | |
| 15 | | 67 | | 116 | |
| 16 | | 68 | | 117 | |
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| 25 | | 77 | | 126 | |
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| 28 | | 80 | | 129 | |
| 29 | | 81 | | 130 | |
| 30 | | 82 | | 131 | |
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| 34 | | 86 | | 135 | |
| 35 | | 87 | | 136 | |
| 36 | | 88 | | 137 | |
| 37 | | 89 | | 138 | |
| 38 | | 90 | | 139 | |
| 39 | | 91 | | 140 | |
| 40 | | 92 | | 141 | |
| 41 | | 93 | | 142 | |
| 42 | | 94 | | 143 | |
| 43 | | 95 | | 144 | |
| 44 | | 96 | | 145 | |
| 45 | | 97 | | 146 | |
| 46 | | 98 | | 147 | |
| 47 | | 99 | | 148 | |
| 48 | | 100 | | 149 | |
| 49 | | | | 150 | |
| 50 | | | | | |

If more than 150 claims or 10 actions
staple additional sheet here

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